## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSULFEE

Mail Stop ISSUMFEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

			• — `	•			
INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifica	ed below or directed otl	for transmitting the ISSI ing the Patent, advance of nerwise in Block 1, by (	UE FEE and PUBLICAT! orders and notification of r a) specifying a new corres	ON FEE (if required). naintenance fees will be pondence address; and/o	Blocks 1 through 5 s mailed to the current r (b) indicating a sepa	hould be completed where correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPOND	ENCE ADDRESS (Note: Use B	ock 1 for any change of address)	Fee(	s) Transmittal, This certiers. Each additional paper	ficate cannot be used in tr, such as an assignment	or domestic mailings of the for any other accompanying ent or formal drawing, must	
29989	7590 11/21	/2006	nave	e its own certificate of ma	iling or transmission.		
2055 GATEWA SUITE 550	Y PLACE	NG & BECKER, I	Stat addi tran	reby certify that this Feeters Postal Service with su	e of Mailing or Trans (s) Transmittal is being flicient postage for fir 1SSUE FEE address (1) 273-2885, on the d	mission g deposited with the United st class mail in an envelope above, or being facsimile late indicated below.	
SAN JOSE, CA			JAN 2 5 2007	NNEME VALO	IVIA	(Depositor's name)	
01/25/2007 BABRAHA2 00000025 10762066			& Annette Valdivia		divia	(Signature)	
01 FC:1501 1400.00 DP		00 OP	TA TRADELARY	1/22/2007		(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTO	PRNEY DOCKET NO.	CONFIRMATION NO.	
10/762,066	10/762,066 01/20/2004		Ozgur C. Leonard 15437-0598		4588		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATEDUS	
	NO NO	<u> </u>			<u> </u>		
nonprovisional	· · · · · · · · · · · · · · · · · · ·	\$1400	\$0.	\$0 1	\$1400	02/21/2007	
EXAMINER ART UNIT			CLASS-SUBCLASS				
	ENNE PIERRE	2161	707-102000				
<ol> <li>Change of correspond CFR 1.363).</li> </ol>	ence address or indication	n of "Fee Address" (37	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys  Christian A.  Nicholes:				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  Hickman Palermo  Truong & Becker LLI  3				
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.							
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or type	oe)		· · · · · ·	
PLEASE NOTE: Un recordation as set for	less an assignee is ident th in 37 CFR 3.11. Com	ified below, no assignee oletion of this form is NC	data will appear on the p	atent. If an assignee is i	dentified below, the d	locument has been filed for	
(A) NAME OF ASSI			=	and STATE OR COUN			
Sun Microsystems, Inc. Santa Clara CA							
Please check the appropr	riate assignee category or	categories (will not be p	printed on the patent):	Individual  Corpora	tion or other private gr	oup entity Government	
4a. The following fce(s)  Issue Fee			b. Payment of Fee(s): (Ples A check is enclosed.		. • •	shown above)	
Publication Fee (N	No small entity discount	permitted)		☐ Payment by credit card. Form PTO-2038 is attached.  ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1302 (enclose an extra copy of this form).			
Advance Order -	# 01 Copies		overpayment, to Depo	sit Account Number 50	7-1302 (enclose a	in extra copy of this form).	
	itus (from status indicate as SMALL ENTITY stati	•	☐ b. Applicant is no lon	ger claiming SMALL FN	TITY status See 37 C	FR 1 27(a)(2)	
						he assignee or other party in	
Authorized Signature	Mid	Milh		Date // 9	1/2007	**************************************	
Typed or printed nam	c <u>/Christia</u>	n A. Nichol	es	Registration No.	50,266	<del></del>	
This collection of inform	nation is required by 37 (	FR 1.311. The informati	ion is required to obtain or i	etain a benefit by the pub	lic which is to file (an	d by the USPTO to process)	
an anniversion Contidor	itiality is governed by 35	11 S C 177 and 27 CCD	1 14 This collection is as	impled to take 17 minute	e to complete includi-	a anthonina meananina and	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.